

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009233

FILED
Aug 06, 2007
Secretary of State

Entity Name: INDIAN RIVER DOLPHIN PROJECT, INC.

Current Principal Place of Business:

4325 STILLWATERS DR.
MERRITT ISLAND, FL 32952 US

New Principal Place of Business:

Current Mailing Address:

4325 STILLWATERS DR.
MERRITT ISLAND, FL 32952 US

New Mailing Address:

FEI Number: 20-3548844 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DOOLEY, JILL
4325 STILL WATERS DR
MERRITT ISLAND, FL 32952 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDINGER, LAUREN E
Address: 530 NEEDLE BLVD
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: T () Delete
Name: EDINGER, JAY N
Address: 700 SOUTH PLUMOSA ST.
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: VP () Delete
Name: DOOLEY, JILL A
Address: 4325 STILLWATERS DR.
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: S () Delete
Name: EDINGER, NATALIE A
Address: 530 NEEDLE BLVD
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EDINGER, LAUREN E
Address: 4325 STILL WATERS DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: DOOLEY, JILL A
Address: 4325 STILL WATERS DR.
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: S (X) Change () Addition
Name: EDINGER, NATALIE A
Address: 4325 STILL WATERS DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JILL DOOLEY

VP

08/06/2007

Electronic Signature of Signing Officer or Director

Date